

DOCUMENT RESUME

ED 086 804

CE 000 817

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TITLE The Job Improvement Service. A Demonstration Project in Occupational Mental Health and an Investment in Productivity.
INSTITUTION Beth Israel Hospital, Boston, Mass.
SPONS AGENCY Manpower Administration (DOL), Washington, D.C.
Office of Research and Development.
PUB DATE 73
NOTE 13p.
EDRS PRICE MF-\$0.65 HC-\$3.29
DESCRIPTORS Counseling; *Counseling Programs; *Demonstration Projects; *Manpower Utilization; *Mental Health Programs; *Vocational Adjustment; Vocational Counseling

ABSTRACT

This project was designed to demonstrate the feasibility and effectiveness of job adjustment counseling and consultation provided at the site of employment by an autonomous professional organization as a means of preventing and ameliorating employees' job adjustment problems, especially among lower income employees. Representatives of management and labor and 373 employees of six Boston employers were given free counseling. The counselors dealt with a wide variety of job-adjustment problems, only some of which were directly work related. The program proved its usefulness in providing a needed service to employees and in helping many of them improve work performance and keep their jobs. One employer was so impressed with the service that he continued the program at company expense. (Author/DS)

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in Occupational Mental Health
and an Investment in Productivity

by Cavin P. Leeman, M.D.

U.S. DEPARTMENT OF HEALTH,
EDUCATION & WELFARE
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Published in 1973 by Beth Israel Hospital, Boston, Mass. under contract with the U.S. Department of Labor, Manpower Administration. Points of view or opinions stated in this article are the author's, and do not necessarily represent the official position or policy of the Department of Labor or the Beth Israel Hospital.

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ACKNOWLEDGMENT

The Job Improvement Service Demonstration Project was supported by Contract No. 82-23-70-02 of the U.S. Department of Labor, Manpower Administration.

The Job Improvement Service was a group effort, whose success depended upon the dedicated participation of the entire project staff and the active collaboration of the work organizations in which the Project operated, including both management and labor.

SUMMARY

The Job Improvement Service Demonstration Project* was designed to demonstrate the feasibility and the effectiveness of job-adjustment counseling and consultation provided at the site of employment by an autonomous professional organization as a means of preventing and ameliorating employees' job-adjustment problems, especially among lower-income employees. Confidential individual counseling by experienced counselors was provided free of charge to 373 employees of six selected Boston employers, and consultation was offered to representatives of management and labor. The process of entry into each work organization, and continued outreach to employees with problems, proved crucial to the success of the Project. The counselors dealt with a wide variety of job-adjustment problems, only some of which were directly work-related. The program proved its usefulness in providing a needed service to employees and in helping many of them to improve their work performance and keep their jobs. At the conclusion of the Demonstration Project one employer was so convinced of the value of the counseling and consultation services provided that the program has been continued at company expense.

*The final report of the Job Improvement Service Demonstration Project is available for \$3 from National Technical Information Service, Springfield, Va. 22151 under Accession No. PB 220183. Reports of the Project's experience will appear in somewhat different form in forthcoming issues of *The Psychiatric Quarterly*¹ and *Harvard Business Review*.²

Introduction

The Job Improvement Service Demonstration Project was operated by the Beth Israel Hospital, Boston, Massachusetts, from August 1, 1969, through June 30, 1972, under contract with the U.S. Department of Labor, Manpower Administration. Prior study (1967-69) established the existence of job-adjustment problems among a significant minority of the employed population, which had the potential to affect production, job satisfaction, and ultimately job retention. The Demonstration Project was designed to gather further information about the nature and frequency of these job-adjustment problems, and to demonstrate the feasibility and effectiveness of job-adjustment counseling and consultation at the site of employment as a means of preventing and ameliorating these problems, especially among lower-income employees.

The intent of the Project went beyond a wish to provide employees with a valuable fringe benefit. It was recognized that workers suffering from personal problems could not perform at the level of their full potential.³ It also was known that in order for employees to work at their best the work environment must provide them with opportunities for satisfaction, self-esteem, and a sense of dignity.^{4,5} Therefore, programs designed to prevent and alleviate job-adjustment problems, regardless of whether these problems originate within the work setting, were expected to benefit employers as well as workers. Employees' productivity was expected to increase along with their job satisfaction and personal adjustment. Furthermore, by helping workers to keep their jobs, the Project was expected to have an indirect effect in reducing the overall costs to the community associated with employee turnover, replacement and training, and unemployment.

The Project worked with six employers in Boston, divided among four types: manufacturing, retail sales, banking, and civil service. At each site there was a significant population of lower-income employees (weekly gross income of \$150 or less) and a commitment by management (and by labor, at the four unionized sites) to support the program.

The emphasis on lower-income employees was based on several considerations. In the first place, these workers have the most meager resources on which to rely in the event of job-termination. Secondly, lower-income employees have been relatively neglected by many "human relations" programs designed to increase the worker's sense of participation in the work organization.⁶ They often also are the least well served by existing resources in the community, not only because of financial barriers, but also because of inflexible hours and other difficulties in making arrangements.⁷ Although the Project was designed with the needs of lower-income workers especially in mind, all employees with problems were encouraged to make use of counseling. Because it was expected that early intervention would be most effective in maintaining the employment of workers with job-adjustment problems, an imminent threat of job loss was not made a condition of eligibility for service.

Counseling and Consultation

The Job Improvement Service counselors were selected on the basis of personal qualities, professional training, and experience in problem-solving interviewing. A director of an employee counseling center stated years ago that "it is easier to take professionally trained people and teach them something about the company than it is to draw employees from the ranks and try to teach them the techniques of counseling."⁸ This is because of the very special combination of warmth, objectivity, flexibility, perceptiveness, and professional competence needed in order to be really helpful to people in trouble. The counselors were supported by a professional staff of supervisors and consultants under the overall direction of a clinical psychiatrist. The Service was autonomous with respect to both management and labor, and was so presented to employees. Confidentiality of counseling was guaranteed, although the counselors were able to collaborate with representatives of management and labor in helping employees, when the employees agreed. A broad spectrum of counseling was offered, with an emphasis on short-term problem-solving techniques. The methods used in counseling have been reported elsewhere,¹ with a selec-

tion of sample cases. When appropriate, employees were referred to resources in the community for additional help.

To make services as accessible as possible, counseling was made available at the site of employment in an office provided by the employer, free of charge, and without loss of pay or benefits to employees. A counseling office away from the work site also was maintained, for the convenience of those employees reluctant to be seen entering a counselor's office at work. Appointments were arranged outside of working hours for those employees for whom this was important, although all cooperating employers agreed to allow employees to meet with the counselor during working hours.

Located within the work setting, Job Improvement Service counselors had a unique opportunity to understand the nature of employees' jobs and of their work environment. A program of service to employed workers permitted utilization of employees' ability to work and to take pride in their work, strengths which are not always available in other types of counseling programs. Similarly, the wish of employees to maintain their employment could be a strong motive for problem solving and behavioral change. The counselor's role within the work organization was designed to provide employees with access to him without defining them as patients, thereby reducing the stigma that might be associated with their seeking help for personal problems.

Employees were encouraged to come to the Job Improvement Service counselors on their own initiative. Referrals by supervisors, managers, and union representatives also were welcomed, but it was stressed that such referrals must be voluntary and that employees could not be required to see the counselor.

The Project staff learned a great deal about how to initiate and operate a program of counseling and consultation within a work organization. For example, the process of entry into the work organization at each employment location was crucial to the success of the Project. This process included making initial contacts with key executives and union leaders, providing orientation and gaining sanction from addi-

tional representatives of management and labor, and establishing visibility and rapport with the worker and supervisory populations. In unionized companies management and the union had to be approached almost simultaneously, to avoid the appearance of partisanship in the relationship between management and labor. It was found to be important for the counselor to develop as many different contacts as possible, at all levels of the company. Thorough understanding, acceptance, and official endorsement by management and by the labor unions proved critical. A continuing process of outreach to employees with job-adjustment problems also was very important. Both lack of awareness of the new resource and lack of trust had to be overcome everywhere, although the specific techniques of communication utilized varied according to the characteristics of each organization and work force.

As management and union representatives became increasingly comfortable with the counselors, they turned to the Job Improvement Service more often for consultation about problems ranging from difficulties with individual employees to broader issues of personnel policy. In several instances this led to significant improvements in the physical and social work environment.

The Job Improvement Service Demonstration Project provided individual counseling services to 373 employees. Because all employees with problems, regardless of income, were encouraged to make use of the program, the client distribution with regard to income closely resembled the population distribution at each work site. This also was true for sex, race, age, education, and tenure of employment.

The problems presented to the counselor included almost the whole range of human difficulties. Employees came because of health problems, problems with wanted and unwanted pregnancies, marital problems, difficulties with boy friends and girl friends, problems in getting along with supervisors, uncertainty about employee benefits, confusion about job tasks, problems with alcohol and with alcoholic relatives, financial difficulties, and many other kinds of distress. Of all the problems presented, only one-fourth were

directly related to the employee's capacity for gainful employment, yet two-fifths of all problems seen had a demonstrable effect on the employee's job. That is, the problem was interfering with satisfactory work performance in one way or another.

Case Examples

The following examples, not reported elsewhere, illustrate several issues often encountered in counseling. The first case is that of Mrs. Carey,* a 36 year-old typist employed at the company for several years. She was referred by her supervisor after a discussion which began with the employee's requesting a transfer to another department. The supervisor had been satisfied with Mrs. Carey's work, but had regarded her as an isolated person who kept apart from her fellow-workers. Although he had noticed that she had become somewhat more irritable in recent weeks, he was surprised both by her request and by her pervasive dissatisfaction that emerged during their conversation. He suggested that the Job Improvement Service counselor might be able to help the employee sort out her thoughts and feelings, and that a decision about a transfer should be deferred. Mrs. Carey approached the counselor hesitantly, not knowing what to expect, but her supervisor's comments had made sense to her. The counselor soon discovered that Mrs. Carey's husband was killed in an automobile accident shortly after she began work at the company. She had little opportunity to mourn his death, because her mother soon became ill with cancer, and the employee assumed the major burden of caring for her until she died about a year later. Since her mother's death, Mrs. Carey had become nervous and irritable. She said that part of herself had died when her husband died, and she was disappointed that she had no children. She felt that her excellent typing was not appreciated, that her pay was too low, and that she couldn't get along with her fellow workers. She had no specific reason for

*Fictitious name — Details of the cases reported have been changed slightly, to protect confidentiality.

requesting a transfer, just a vague sense that things might be better elsewhere.

The counselor's impression was that Mrs. Carey was experiencing a prolonged grief reaction, and that she would benefit from ventilating her feelings and memories about her husband and her mother. At first she idealized them, but after a few sessions, when she already was feeling a little better, she began to talk about some of the difficulties in her relationships with them. She decided not to change jobs, but to enroll in an extension course and to try to develop relationships outside of work. Shortly after this, Mrs. Carey's supervisor reported that she had changed a great deal. Minor annoyances no longer seemed to upset her, and she was much friendlier with the other workers in the department. By the time of termination, after 12 sessions spread over four months, both the employee and her supervisor were very pleased with her progress.

The counselor must assess whether a problem manifested at work can be handled most effectively by approaching it directly in terms of the work organization itself, or by helping the employee with problems originating in other sectors of his life. Examples of both types have been reported elsewhere.¹ Mrs. Carey's difficulties with her fellow-workers cleared up when the counselor helped her to work through her grief reaction, which had nothing to do with work.

Occasionally a supervisor may complain of problems in supervision that reflect unresolved issues in the supervisor's personal life. For example, Mrs. Jensen, a 30 year-old divorced supervisor, came to the counselor on her own initiative for help in extricating herself from a difficult relationship with a teen-aged girl in her department. She felt that she had become emotionally too involved with this girl's life, and that she was not able to supervise her effectively. In the first interview the counselor was able to explore with Mrs. Jensen her over-identification with the girl, in whom Mrs. Jensen felt she recognized herself when she was younger. The girl talked openly about her boy friend, and Mrs. Jensen got caught up in giving her advice, so that she wouldn't "ruin her life", as Mrs. Jensen felt that she herself had done by marrying badly

when she was the girl's age. The counselor helped Mrs. Jensen to understand the factors in her own life that made her respond so strongly to the girl's personal problems, explained that she could not live the girl's life for her, and encouraged Mrs. Jensen to keep the relationship with the girl much more centered on work. In a second session two weeks later Mrs. Jensen said that the counselor's suggestions had made a big difference, and that things were going much better.

In helping Mrs. Carey and Mrs. Jensen, the counselor's psychological understanding was of major importance. When an employee needs help with problems involving legal matters, housing, immigration, or welfare benefits, the counselor not only must have a thorough familiarity with community resources, but be able to make referrals in a way that leads to the employee's actually receiving the assistance he needs. Over four-fifths of all referrals made by Job Improvement Service counselors were consummated, in contrast to much less satisfactory experience reported from traditional agencies.⁷

Results

The experience of the Demonstration Project is that job-adjustment counseling and consultation services provided at the site of employment by a program autonomous with respect to management and labor can be quite useful. Four-fifths of the clients who responded to a follow-up questionnaire stated that they preferred to have a counselor located at work rather than elsewhere; three-fifths were unable to name another resource to which they would have gone for help if the Job Improvement Service had not been available. One-half of all employees served showed substantial improvement with respect to the main problem they presented to the counselor, as rated by the Project staff, and another one-quarter showed limited improvement.

Project evaluation interviews were conducted with supervisors and other representatives of management and labor, who generally expressed a very favorable reaction to the Job Improvement Service. At the Bank, management was so impressed with the usefulness of the program that they con-

tracted with the Beth Israel Hospital to provide counseling and consulting services during 1972, at company expense. This contract has been renewed for 1973, and again in 1974, and the Bank has expressed its commitment to maintain the Job Improvement Service as a permanent program. The overall experience of the Service at the Bank has been reported recently.²

The Demonstration Project has shown that many workers with problems are able to use and benefit from counseling and consulting services provided without charge at the site of employment. A program of counseling and consultation can lead to improvement not only in employees' personal satisfaction, but also in their work performance. These services represent, therefore, not merely a fringe benefit, but also an investment in productivity.

REFERENCES

1. Leeman, C.P. A Demonstration Project in Occupational Mental Health Services: The Job Improvement Service. *Psychiatric Quarterly*, in press.
2. Leeman, C.P. The Role of an Autonomous Professional Counseling Program for Employees. *Harvard Business Review*, in press.
3. Eaton, M. T., Jr., Hostettler, M.A.: Mental Health and the Capacity for Work, in *Mental Health and Work Organizations: Cornell Occupational Mental Health Conferences, 1967-69*, Edited by McLean, A.A. Chicago: Rand McNally, 1970, pp. 143-169.
4. Levinson, H. Weinbaum, L.: The Impact of Organization on Mental Health, in *Mental Health and Work Organizations*, op. cit., pp. 23-49.
5. Zaleznik, A., Ondrack, V., Silver, A.: Social Class, Occupation, and Mental Illness, in *Mental Health and Work Organizations*, op. cit., pp. 116-142.
6. Dumont, M.P.: *The Absurd Healer*. New York: Science House, 1968: Ch.8, Mental Health of Organizations.
7. Ryan, W.: *Distress in the City: A Summary Report of the Boston Mental Health Survey (1960-62)*. Boston: Massachusetts Association for Mental Health, 1966.
8. Levinson, H.: Employee Counseling in Industry: Observations on Three Programs. *Bulletin of the Menninger Clinic*, 20: 76-84, 1956.